

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	i.a.		
O.I.P.E. CLASSIFIER	W. I	<u> </u>	Shar a
FORMALITY REVIEW	200	CED	7116115
RESPONSE FORMALITY REVIEW	4/1	ـــــــ 6. ک.خر	18-6-62

INDEX OF CLAIMS

•	Rejected	N	Non-elected
	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appear
÷	Restricted	0	Objected

÷	Hestricted	0	Objected
Claim Date	Claim	Date	Cam
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<u> i50; </u>	100	 • • •	

If more than 150 claims or 10 actions staple additional sheet here

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